

<i>SERFF Tracking Number:</i>	<i>MUTM-126507071</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>United of Omaha Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>44912</i>
<i>Company Tracking Number:</i>	<i>JAMIE LUCY</i>		
<i>TOI:</i>	<i>MS08I Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS08I.001 Plan A 2010</i>
	<i>Standard Plans 2010</i>		
<i>Product Name:</i>	<i>Medicare Supplement Advertising - UC7495</i>		
<i>Project Name/Number:</i>	<i>Medicare Supplement Advertising/UC7495</i>		

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: MUTM-126507071 State: Arkansas
Advertising - UC7495

TOI: MS08I Individual Medicare Supplement - SERFF Status: Closed-Filed State Tr Num: 44912
Standard Plans 2010

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: JAMIE LUCY State Status: Filed-Closed
Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Author: Jamie Lucy Disposition Date: 03/17/2010

Date Submitted: 02/18/2010 Disposition Status: Filed

Implementation Date Requested: Implementation Date:

State Filing Description:

General Information

Project Name: Medicare Supplement Advertising

Project Number: UC7495

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 03/17/2010

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 03/17/2010

Created By: Jamie Lucy

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Jamie Lucy

Filing Description:

Please see cover letter under the supporting documentation tab.

Company and Contact

Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com

Consultant

Regulatory Affairs 402-351-2476 [Phone]

SERFF Tracking Number: MUTM-126507071 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 44912
Company Tracking Number: JAMIE LUCY
TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
Standard Plans 2010
Product Name: Medicare Supplement Advertising - UC7495
Project Name/Number: Medicare Supplement Advertising/UC7495

Mutual of Omaha Plaza 402-351-5298 [FAX]
Omaha, NE 68175

Filing Company Information

United of Omaha Life Insurance Company	CoCode: 69868	State of Domicile: Nebraska
Mutual of Omaha Plaza	Group Code: 261	Company Type: Life Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-6420 ext. [Phone]	FEIN Number: 47-0322111	

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$50.00	02/18/2010	34283923

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	03/17/2010	03/17/2010

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<i>TOI:</i>	<i>MS08I Individual Medicare Supplement - Standard Plans 2010</i>	<i>Sub-TOI:</i>	<i>MS08I.001 Plan A 2010</i>
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Disposition

Disposition Date: 03/17/2010

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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<i>Company Tracking Number:</i>	<i>JAMIE LUCY</i>		
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	cover letter	Accepted for Informational Purposes	Yes
Form	Brochure Insert	Filed	Yes

SERFF Tracking Number: MUTM-126507071 State: Arkansas

Filing Company: United of Omaha Life Insurance Company State Tracking Number: 44912

Company Tracking Number: JAMIE LUCY

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
Standard Plans 2010

Product Name: Medicare Supplement Advertising - UC7495

Project Name/Number: Medicare Supplement Advertising/UC7495

Form Schedule

Lead Form Number: UC7495

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed 03/17/2010	UC7495	Advertising Brochure Insert	Initial		0.000	UC7495.pdf



2010 Medicare Supplement Insurance Plans M and N

Plans M and N are generally lower-priced than other Medicare supplement plans for a simple reason: You help pay more of the out-of-pocket costs Medicare doesn't cover.

For example, Plan M pays half of the Medicare Part A deductible and you pay half. And, Plan M does not pay the Medicare Part B deductible or for excess benefits, you do. That lowers your annual Plan M premium.

Plan N doesn't pay the Medicare Part B deductible or for excess benefits either, you do. You also help pay the Medicare Part B coinsurance for office and emergency room visits.

As with any choice, it comes down to what you're comfortable with. Plans M and N might be attractive options if you prefer lower premiums in exchange for higher out-of-pocket costs.

	Medicare Pays	Plan M Pays	Plan N Pays
Medicare Part A – Hospital Insurance*			
Deductible	Nothing	\$550 (50%)	\$1,100
First 60 days	100%		
Coinsurance 61-90 days	All but \$275 a day	\$275 a day	\$275 a day
Coinsurance 91-150 days	All but \$550 a day	\$550 a day	\$550 a day
Extended Hospital Coverage (up to an additional 365 days in your lifetime)	Nothing	Eligible Expenses	Eligible Expenses
Benefit for Blood	All but three pints	Three pints	Three pints
Skilled Nursing Facility Care			
First 20 days	100%		
Coinsurance 21-100 days	All but \$137.50 a day	Up to \$137.50 a day	Up to \$137.50 a day
Hospice Care			
Outpatient Prescription Drugs	All but \$5	\$5	\$5
Inpatient Respite Care	All but 5%	5% of Medicare's approved amount	5% of Medicare's approved amount
Medicare Part B – Medical Insurance*			
Deductible	Nothing		
Coinsurance	Generally 80%	Generally 20%	Generally 20%**
Excess Benefits			
Benefit for Blood	All but three pints	Three pints	Three pints
Additional Benefit*			
Emergency Care Received Outside the U.S.	Nothing	Generally 80% to lifetime max of \$50,000	Generally 80% to lifetime max of \$50,000

* Refer to your outline of coverage for more information.

** Requires up to a \$20 copayment for an office visit and up to a \$50 copayment for an emergency room visit.

Your Premium

\$ _____

Your Premium

\$ _____

Underwritten by

UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY

Mutual of Omaha Plaza

Omaha, NE 68175

mutualofomaha.com



**UNITED OF OMAHA LIFE
INSURANCE COMPANY**

A MUTUAL of OMAHA COMPANY

Policy Forms UM30/UM30U-Plan M, UM31/UM31U-Plan N (in ID, UM30-22551, UM31-22552; in NC, UM30-22567NC/UM30U-22569NC, UM31-22568NC/UM31U-22570NC; in OK, UM30-22579, UM31-22580; in OR, UM30-22543, UM31-22544; in TX, UM30-22587, UM31-22588).

This is a brief description of your coverage. The outline of coverage must accompany this brochure. For complete information on benefits, exceptions, limitations and reductions, please read your outline of coverage and your policy. (In WV, the policy may only be applied for 30 days prior to the effective date of Medicare eligibility.) United of Omaha Life Insurance Company is licensed nationwide except in NY.

This is a solicitation of insurance and an insurance agent will contact you by telephone.

Neither United of Omaha Life Insurance Company nor its Medicare supplement insurance policies are connected with or endorsed by the U.S. government or the federal Medicare program.

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Supporting Document Schedules

		Item Status:	Status
			Date:
Satisfied - Item:	cover letter	Accepted for Informational Purposes	03/17/2010
Comments:			
Attachment:			
AR Letter Use.pdf			

UNITED of OMAHA

UNITED of OMAHA LIFE INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600



February 18, 2010

Arkansas Department of Insurance
Attn: Compliance - Life & Health
1200 West Third Street
Little Rock, AR 72201-1904

NAIC #261-69868
FEIN #47-0322111
United of Omaha Life Insurance Company
Medicare Supplement Advertising
UC7495

Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

Thank you.

Sincerely,

Carly Cole
Product and Advertising Compliance Consultant
Regulatory Affairs

Phone: 402-351-2476
Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

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